Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 1 of 43

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF TENNESSEE	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself					
		About Debtor 1:	About I	Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued	Denessa	Finder			
	picture identification (for example, your driver's	First name	First na	me		
	license or passport).	Denise Middle name	Middle	name		
	Bring your picture identification to your meeting with the trustee.	Cartwright Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years Include your married or	е				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6798				

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Page 2 of 43 Case number (if known) Main Document

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
 Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years 		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		6719 Triple Crown Court Chattanooga, TN 37421				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Hamilton County	County			
ab		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
5.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Page 3 of 43 Case number (if known) Main Document

Debtor 1 **Denessa Denise Cartwright**

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. District **Eastern TN** When 7/09/14 Case number 14-12945 District **Eastern TN** When 9/23/13 Case number 13-14726 District See Attachment When Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you District When Case number, if known 11. Do you rent your No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document

Page 4 of 43 Case number (if known) Debtor 1 Denessa Denise Cartwright

art	Report About Any Bu	sinesses	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busine	ess		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach	Number, Street, City, State & ZIP Code					
	it to this petition.		Check	Check the appropriate box to describe your business:			
				Health Care Busines	s (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real Es	state (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defin	ned in 11 U.S.C. § 101(53A))		
				Commodity Broker (a	as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chapter	11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ing under Chapter 11	and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any P	Property That Needs Immediate Attention		
	Do you own or have any		11020100	20 1 10polity 0. 7y 1	Topolly That Neede Immodule Allondon		
14.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	ne hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	umber, Street, City, State & Zip Code		

Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Case 1:19-bk-12991-NWW Page 5 of 43
Case number (if known) Main Document

Debtor 1

Denessa Denise Cartwright

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document

Page 6 of 43 Case number (if known) Debtor 1 Denessa Denise Cartwright

Par	6: Answer These Questi	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,	ner debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe th	at are not consumer debts or business de	bts				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses are paid that funds will		□ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000				
19.	How much do you estimate your assets to be worth?	□ \$0 - \$50,000 □ \$50,001 - \$100,000 ■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you estimate your liabilities to be?	\$100 ,	50,000 101 - \$100,000 101 - \$500,000 1001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Par	t7: Sign Below								
For	you	If I have of United Still If no attordocument I request I understabankrupt and 3571 /s/ Deness	examined this petition, and I declare under penalty of perjury that the information provided is true and correct. e chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. torney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ent, I have obtained and read the notice required by 11 U.S.C. § 342(b). est relief in accordance with the chapter of title 11, United States Code, specified in this petition. estand making a false statement, concealing property, or obtaining money or property by fraud in connection with a ptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 (71). nessa Denise Cartwright Signature of Debtor 2						
Signature of Debtor 1 Executed on July 22, 2019 Executed on MM / DD / YYYY					D/YYYY				

Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Case 1:19-bk-12991-NWW Page 7 of 43
Case number (if known) Main Document

Debtor 1 **Denessa Denise Cartwright**

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ W. Thomas Bible, Jr.	Date	July 22, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
W. Thomas Bible, Jr. 014754		
Tom Bible Law Firm name		
6918 Shallowford Road, Suite 100		
Chattanooga, TN 37421		
Number, Street, City, State & ZIP Code		
Contact phone (423)424-3116	Email address	tom@tombiblelaw.com or melinda@tombiblelaw.com
014754 TN		
Bar number & State		

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Page 8 of 43
Case number (if known) Main Document

Debtor 1 Denessa Denise Cartwright

Fill in this infor	mation to identify your	case:			
Debtor 1	Denessa Denise Cartwright				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F TENNESSEE		
Case number					
(if known)					

FORM 101. VOLUNTARY PETITION

Prior Bankruptcy Cases Filed Attachment

District	Case Number	Date Filed
Eastern TN	14-12945	7/09/14
Eastern TN	13-14726	9/23/13
Eastern TN	13-13989	8/12/13

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 9 of 43

Filli	n this inform	nation to identify you	r case:			
Debt		Denessa Denise				
		First Name	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	EASTERN DISTRICT OF	TENNESSEE		
(if kno	e number wn)				_	Check if this is an mended filing
Sta Be as	s complete a	of Financial		are filing together, both are	equally responsible for sup	
). Answer every ques		this form. On the top of any	y additional pages, write you	ir name and case
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. \	What is your	current marital statu	ıs?			
	□ Married■ Not marr	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and V	
1	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
I	Fill in the total	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
ı	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,042.13	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Page 10 of 43 Case number (if known) Main Document

				Debtor 1			Debtor 2		
For last calendar year: (January 1 to December 31, 2018)		Sources of income Check all that apply.		income e deductions and ions)	Sources of ince Check all that a		Gross income (before deductions and exclusions)		
		■ Wages, commissions, bonuses, tips		\$58,589.00	☐ Wages, combonuses, tips	missions,			
				☐ Operating a business			☐ Operating a I	business	
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips		\$45,000.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a I	business	
5.	Include include and other winnings. I	come regard public bene If you are fili	lless of wheth fit payments; ng a joint cas he gross inco	e during this year or the two ler that income is taxable. Ex pensions; rental income; inte le and you have income that ome from each source separa	camples of erest; divid you receiv	other income are a ends; money collec- yed together, list it o	alimony; child supported from lawsuits; only once under De	royalties; and ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each	s income from source e deductions and ions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)
	om January e date you f		nt year until nkruptcy:	Child Support		\$2,693.04			
	or last calen anuary 1 to		31, 2018)	Child Support		\$4,616.64			
	or the calend anuary 1 to			Child Support		\$4,616.64			
Pa	art 3: List	Certain Pa	vments You	Made Before You Filed for	Bankrup	tcv			
6.		Debtor 1's	or Debtor 2'	s debts primarily consume bebtor 2 has primarily consi personal, family, or househo	er debts? umer deb	ts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the	90 days befo	re you filed for bankruptcy, d	lid you pay	any creditor a tota	al of \$6,825* or mor	·e?	
		□ No.	Go to line 7						
		☐ Yes	paid that cre not include	each creditor to whom you pa editor. Do not include payme payments to an attorney for t	nts for dor this bankr	nestic support obliquetcy case.	gations, such as ch	ild support a	nd alimony. Also, do
		* Subject	to adjustment	on 4/01/22 and every 3 year	rs after tha	at for cases filed on	or after the date of	i adjustment.	
	Yes.			r both have primarily consure you filed for bankruptcy, d			al of \$600 or more?		
		■ No.	Go to line 7						
		□ Yes	List below e include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.					
	Creditor's	s Name and	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Page 11 of 43 Case number (if known) Main Document

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						
	No						
	☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer	any property on a	ccount of a de	ebt that benefited an	
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name	
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.						
	Case title	Nature of the case	Court or agoney		Status of th	0.0250	
	Case number	Nature of the case	Court or agency		Status of th	e case	
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.						
	☐ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happened	d			property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount	
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 						
Pa	rt 5: List Certain Gifts and Contributions						
	Within 2 years before you filed for bankrup ■ No	otcy, did you give any gift	s with a total value	of more than \$60	0 per person?	,	
	☐ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Main Document Page 12 of 43 Case number (if known) Debtor 1 Denessa Denise Cartwright 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or property transferred payments received or debts Address made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No

Yes. Fill in the details.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

П

page 4

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Page 13 of 43 Case number (if known) Main Document

Pa	τ δ:	List of Certain Financial Accounts, in	istruments, Safe Deposit	Boxes, and Sto	orage Units	
20.	solo Incl	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, clossold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokeranouses, pension funds, cooperatives, associations, and other financial institutions. No		•		
		No Yes. Fill in the details.				
	Na	me of Financial Institution and dress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other cash, or other valuables?						ository for securities,
		No Yes. Fill in the details.				
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe the contents	Do you still have it?
22.	Hav	re you stored property in a storage unit	or place other than your	home within 1	year before you filed for bankru	ptcy?
		No Yes. Fill in the details.				
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the contents	Do you still have it?
Pai	t 9:	Identify Property You Hold or Contro	I for Someone Else			
23.		you hold or control any property that so someone.	omeone else owns? Inclu	ıde any propert	y you borrowed from, are storing	g for, or hold in trust
		No Yes. Fill in the details.				
	_	ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Pai	t 10:	Give Details About Environmental In	formation			
For	the p	ourpose of Part 10, the following definit	ions apply:			
	toxi	rironmental law means any federal, stat c substances, wastes, or material into a ulations controlling the cleanup of thes	the air, land, soil, surface	water, ground	- ·	
		means any location, facility, or proper wn, operate, or utilize it, including disp	-	environmental la	aw, whether you now own, opera	ate, or utilize it or used
		<i>tardous material</i> means anything an env ardous material, pollutant, contaminant		as a hazardous	waste, hazardous substance, to	xic substance,
Rep	ort a	II notices, releases, and proceedings th	nat you know about, rega	rdless of when	they occurred.	
24.	Has	any governmental unit notified you that	at you may be liable or po	otentially liable	under or in violation of an enviro	onmental law?
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental uni Address (Number, St ZIP Code)		Environmental law, if you know it	Date of notice
			,			

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 14 of 43 Case number (if known)

25.	Have you notified any governmental unit of any release of hazardous material?								
		No							
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it ZIP Code)								
26.	Hav	e you been a party in any judicial or adm	inistrative proceeding under any envir	onmental law? Include settlements a	nd orders.				
		No Yes. Fill in the details.							
	Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Nature of the case								
Par	t 11:	Give Details About Your Business or C	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrupto	cy, did you own a business or have any	y of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	p (LLP)					
		☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting	or equity securities of a corporation						
		No. None of the above applies. Go to P	art 12.						
		Yes. Check all that apply above and fill	in the details below for each business.						
		siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security r					
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		iumber of friit.				
				Dates business existed					
28.		Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No □ Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)								

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Page 15 of 43 Case number (if known) Main Document

Part 12: Sign Below		
are true and correct. I ur	nderstand that making a false s can result in fines up to \$250,00	Affairs and any attachments, and I declare under penalty of perjury that the answers tatement, concealing property, or obtaining money or property by fraud in connection 00, or imprisonment for up to 20 years, or both.
/s/ Denessa Denise C	artwright	
Denessa Denise Cart Signature of Debtor 1	wright	Signature of Debtor 2
Date <u>July 22, 2019</u>		Date
Did you attach additiona	I pages to Your Statement of F	inancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No		
☐ Yes		
Did you pay or agree to	pay someone who is not an att	orney to help you fill out bankruptcy forms?
No		
☐ Yes. Name of Person	. Attach the Bankruptcy Pe	etition Preparer's Notice, Declaration, and Signature (Official Form 119).

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	Case 1	L.19-DK-12991-		ment Page 16 of 43	13.37.00	Desc
Fill	in this informa	ation to identify your		Hell Paue 10 01 43		
Del	otor 1	Denessa Denise	Cartwright			
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bank	kruptcy Court for the:	EASTERN DISTRICT O	FTENNESSEE		
Cas	se number					
	nown)				_	ck if this is an
					amer	nded filing
\sim t	ficial Fam	400C				
		m 106Sum	and Liabilities an	d Certain Statistical Information	2	40/45
				are filing together, both are equally responsible		12/15 ng correct
nfo	rmation. Fill οι	ut all of your schedul	es first; then complete the	e information on this form. If you are filing ame the box at the top of this page.		
Par	_	rize Your Assets	new cummary and eneck	the box at the top of this page.		
rai	t I. Sullilla	nze roui Assets				
						assets of what you own
1.	Schedule A/E	B: Property (Official Fo	orm 106A/B)			
					\$	157,300.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	7,395.68
	1c. Copy line	63, Total of all propert	y on Schedule A/B		. \$	164,695.68
Par	t 2: Summai	rize Your Liabilities				
					Your	liabilities
						nt you owe
2.			laims Secured by Property	(Official Form 106D) he bottom of the last page of Part 1 of Schedule D	\$	146,982.00
0	.,	,		1 3	•	•
3.			Unsecured Claims (Official 1 (priority unsecured claims	s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of <i>Schedule E/F</i>	\$	483.36
				Your total liabiliti	es \$	147,465.36
Par	t 3: Summai	rize Your Income and	Expenses			
4.		our Income (Official Formbined monthly incom		I	. \$	4,687.50
5.	Schedule J: Y Copy your mo	our Expenses (Official onthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$	3,015.00
Par	t 4: Answer	These Questions for	Administrative and Statis	stical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to the court with	your other so	chedules.
	■ Yes	- '	-			
7.		debt do you have?				

- - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Main Document

Debtor 1 Denessa Denise Cartwright

Page 17 of 43 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,698.21 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 1:19	9-bk-129		Doc 1	1 Filed 07/22/19 Entered Occument Page 18 of 43	07/22/1	.9 13:37	:00 Desc
	n this information	to identify						
Deb			nise Cartwright					
J oh	First	t Name	Middle	Name	Last Name			
		t Name	Middle	Name	Last Name			
Inite	ed States Bankrupt	cy Court for	the: EASTERN	DISTRI	CT OF TENNESSEE			
case	e number					_		☐ Check if this is ar
								amended filing
3C	icial Form	/B: P	roperty					12/15
ink forn	it fits best. Be as contained in the space of the space o	omplete and e is needed,	accurate as possibl attach a separate sl	e. If two neet to ti	only once. If an asset fits in more than one comarried people are filing together, both are enis form. On the top of any additional pages, very state You Own or Have an Interest In	qually respo	nsible for su	pplying correct
.1				What	is the property? Check all that apply			
	6719 Triple Cro	wn Court			Single-family home	Do not dedu	ıct secured cla	ims or exemptions. Put
•	Street address, if availab	ole, or other des	scription		Duplex or multi-unit building Condominium or cooperative	the amount	of any secure	d claims on Schedule D: ns Secured by Property.
	Chattanooga	TN	37421-0000		Manufactured or mobile home Land	Current val	erty?	Current value of the portion you own?
	City	State	ZIP Code		Investment property Timeshare		7,300.00	\$157,300.00
					Other	(such as fe	e simple, ten	our ownership interest ancy by the entireties, o
				Who	has an interest in the property? Check one Debtor 1 only	a life estate	e), if known.	
	Hamilton			_	Debtor 2 only			
	County				Debtor 1 and Debtor 2 only	☐ Check	if this is com	munity property
				Other	At least one of the debtors and another	(see inst	ructions)	
					r information you wish to add about this item, erty identification number:	such as 100	iai	
	Add the dollar valu	je of the n	ortion volunwn fo	r all of	your entries from Part 1, including any e	ntries for		
					r here		=>	\$157,300.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Schedule A/B: Property

Official Form 106A/B

page 2

Debtor 1	Denessa Deni	se Cart	wright	Main Document	Page 20 of	43 Case number (if known)	
☐ Yes.	Describe		_				
11. Clothe	es						
		nes, furs,	leather coat	ats, designer wear, shoes,	accessories		
	Describe						
	Г	01.41					¢200.00
	L	Clothes	i				\$200.00
12. Jewel	rv						
_Exam	•	elry, cost	ume jewelry,	, engagement rings, wedd	ling rings, heirloom je	welry, watches, gems, ç	gold, silver
□ No ■ Yes	. Describe						
							\$400.00
	ا	Jewelry	1				\$100.00
13 Non-f :	arm animals						
	ples: Dogs, cats, bir	ds, hors	es				
■ No	Describe						
14. Any o ■ No	ther personal and	househo	old items yo	ou did not already list, in	cluding any health a	aids you did not list	
	Give specific infor	mation					
				from Part 3, including an		you have attached	\$4,300.00
101 F	art 3. Write that he	iiiibei iie	#I &				
Part 4: De	escribe Your Financia	al Assets					
			uitable inter	rest in any of the followi	ing?		Current value of the
							<pre>portion you own? Do not deduct secured</pre>
							claims or exemptions.
16. Cash	unles: Money you ha	ve in voi	ır wallet in v	your home, in a safe depo	sit hox, and on hand	when you file your netiti	on
□ No	pied. Money you na	vo iii yoc	ii wanci, iii y	your nome, in a sale appoin	on box, and on hand t	when you me your pend	OII
Yes.							
						Cash	\$8.00
	sits of money	inge or	other financia	ial accounts; certificates of	f denocit: chares in cr	redit unions brokerage	houses and other similar
				ccounts with the same insti		edit dilloris, blokerage	louses, and other similar
□ No				Institution na	ame:		
■ Yes.							
		17.1.	Checking	Suntrust			\$1,100.00
		17.2	Savings	Suntrust			\$5.68
		17.2.	Savings	Junitust			ΨJ.00
18. Bond s	s, mutual funds, or	publich	traded stoo	ocks			
Exam	ples: Bond funds, in	vestmen	t accounts w	with brokerage firms, mone	ey market accounts		
■ No □ Yes		Ir	nstitution or is	issuer name:			

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc

Official Form 106A/B Schedule A/B: Property page 3

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc

Main Document Page 21 of 43

Case number (if known)

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnersh joint venture

19.	joint venture	Stock and interests in incorpo	orated and unincorporat	ed businesses, including an interes	st in an LLC, partnersnip, and
	■ No □ Yes. Give specific i	information about them			
		Name of entity:		% of ownership:	
20.	Negotiable instrumen	rporate bonds and other negonts include personal checks, casuments are those you cannot transformation about them Issuer name:	shiers' checks, promissory	notes, and money orders.	
21.	Retirement or pension Examples: Interests in		103(b), thrift savings accou	ints, or other pension or profit-sharing	g plans
	Yes. List each acco	unt separately. Type of account:	Institution name:		
20	Conveitor dominaite au				
22 .		sed deposits you have made so		rvice or use from a company s, water), telecommunications compa	nies, or others
	☐ Yes		Institution name or	individual:	
23.	_	for a periodic payment of mone	ey to you, either for life or t	or a number of years)	
	■ No □ Yes	Issuer name and description.			
24.	26 U.S.C. §§ 530(b)(1)	tion IRA, in an account in a q), 529A(b), and 529(b)(1).	ualified ABLE program,	or under a qualified state tuition pr	ogram.
	■ No □ Yes	Institution name and description	n. Separately file the recor	ds of any interests.11 U.S.C. § 521(c)):
25.		future interests in property (o	other than anything listed	l in line 1), and rights or powers ex	ercisable for your benefit
	■ No□ Yes. Give specific i	information about them			
26.		trademarks, trade secrets, ar omain names, websites, procee			
	■ No□ Yes. Give specific i	information about them			
27.	Examples: Building p	s, and other general intangible ermits, exclusive licenses, coop		gs, liquor licenses, professional licens	ses
	■ No□ Yes. Give specific i	information about them			
M	oney or property owed	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to	you			
	■ No □ Yes. Give specific in	nformation about them, including	g whether you already filed	d the returns and the tax years	
29	Family support				-
_0.		or lump sum alimony, spousal s	support, child support, maii	ntenance, divorce settlement, propert	y settlement
	☐ Yes. Give specific in	nformation			

Official Form 106A/B Schedule A/B: Property page 4

Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Case 1:19-bk-12991-NWW Main Document Page 22 of 43 Case number (if known) Debtor 1 **Denessa Denise Cartwright** 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,113.68 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Case 1:19-bk-12991-NWW Main Document

Page 23 of 43
Case number (if known) Debtor 1 **Denessa Denise Cartwright** Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 55. \$157,300.00 Part 2: Total vehicles, line 5 56. \$1,982.00 Part 3: Total personal and household items, line 15 57. \$4,300.00 58. Part 4: Total financial assets, line 36 \$1,113.68 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Copy personal property total Total personal property. Add lines 56 through 61... 62. \$7,395.68 \$7,395.68

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$164,695.68

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Des

		IVICILITION	111 5 111	11 43	
Fill in this infor	rmation to identify your	case:			
Debtor 1	Denessa Denise	Cartwright			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE		
Case number					_ 0
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	otions are	you claiming?	Check one only	, even if	your spouse is	s filing with	you.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	-	-		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
6719 Triple Crown Court Chattanooga, TN 37421 Hamilton	\$157,300.00		\$5,000.00	Tenn. Code Ann. § 26-2-30
County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2003 Ford Mustang 189k miles	\$1,982.00		\$1,982.00	Tenn. Code Ann. § 26-2-103
Ellie Holli Genedale Av.B. G.1			100% of fair market value, up to any applicable statutory limit	
Furniture Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	Tenn. Code Ann. § 26-2-103
Line from Schedule AVD. 4.1			100% of fair market value, up to any applicable statutory limit	
TV (4); Smartphone (2); Home Entertainment System (1); Nintendo	\$2,000.00		\$2,000.00	Tenn. Code Ann. § 26-2-103
Switch (1) Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$200.00		\$200.00	Tenn. Code Ann. § 26-2-104
Ello IIolii Goriodalo FVD. 1111			100% of fair market value, up to any applicable statutory limit	

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 25 of 43

Debtor 1	otor 1 Denessa Denise Cartwright		Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che				
	Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	Tenn. Code Ann. § 26-2-103		
	Ellio IIolii oomoogie / v Z. 1 = 1 ·			100% of fair market value, up to any applicable statutory limit			
	Cash Line from Schedule A/B: 16.1	\$8.00		\$8.00	Tenn. Code Ann. § 26-2-103		
	Ellie Holli Schedule AVB. 19.1			100% of fair market value, up to any applicable statutory limit			
	Checking: Suntrust Line from Schedule A/B: 17.1	\$1,100.00		\$1,100.00	Tenn. Code Ann. § 26-2-103		
	Lille Holli Schedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit			
	Savings: Suntrust Line from Schedule A/B: 17.2	\$5.68		\$5.68	Tenn. Code Ann. § 26-2-103		
	Ellie Holli Schedule AVB. 11-2			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)		
				045 1 1 6 (1) 141			
	Yes. Did you acquire the property cover	ed by the exemption wi	itnin 1	,215 days before you filed this case	<i>?</i>		
	Π Υρς						

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc

to identify you		26 of 43		
to identify you	i case.			
			-	
				if this is an ed filing
6D				
	Who Have Claims Secured	by Propert	У	12/15
laims secured by	your property?			
ox and submit th	nis form to the court with your other schedules. You	u have nothing else t	o report on this form.	
the information	below.			
		Column A	Column B	Column C
n one creditor has	a particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
nancial	Describe the property that secures the claim:	\$146,982.00	\$157,300.00	\$0.00
ad; Suite	6719 Triple Crown Court Chattanooga, TN 37421 Hamilton County As of the date you file, the claim is: Check all that apply. □ Contingent			
ate & Zip Code	☐ Unliquidated ☐ Disputed			
neck one.	Nature of lien. Check all that apply.			
	An agreement you made (such as mortgage or security car loan)	red		
only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	_			
	Other (including a right to offset)			
Opened 01/17 Last				
	inessa Denise Name cy Court for the: CPECITORS cate as possible. I lonal Page, fill it of the information in the information in the information in the information in an one creditor has ranged Claims If a creditor has ranged claims in alphabetic in ancial in ancial in the information in the in	In identify your case: In essa Denise Cartwright It Name Middle Name Last Name Last Name Last Name Cy Court for the: EASTERN DISTRICT OF TENNESSEE EASTERN DISTRICT OF TENNESSEE Creditors Who Have Claims Secured In the count of the count with your other schedules. You the information below. It acreditor has more than one secured claim, list the creditor separately none creditor has a particular claim, list the other creditors in Part 2. As claims in alphabetical order according to the creditor's name. In annotal Describe the property that secures the claim: 6719 Triple Crown Court Chattanooga, TN 37421 Hamilton County As of the date you file, the claim is: Check all that apply. h, TX Contingent Only Statutory lien. Check all that apply. An agreement you made (such as mortgage or securated to a laws it and another ates to a Cohen Court (including a right to offset) Opened	It name	In same

Add the dollar value of your entries in Column A on this page. Write that number here: \$146,982.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$146,982.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 27 of 43

Debto	or 1 Denessa De	nise Cartwright		Case number (if known)
	First Name	Middle Name	Last Name	
				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Name, Number, Stree Rubin, Lublin, F 119 S. Main Stre Memphis, TN 38	eet, Suite 500		On which line in Part 1 did you enter the creditor? Last 4 digits of account number

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc

Odoc	, 1.10 BK 12001 I	Main Do	ocument Page	28 of 43	3.07.00 Bese
Fill in this infor	mation to identify your			. 7 (1 (7) 4.)	
Debtor 1	Denessa Denise (Partwright			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRI	CT OF TENNESSEE		
Case number					
(if known)					☐ Check if this is an
					amended filing
	4005/5				
Official For					
<u> Schedule l</u>	E/F: Creditors W	ho Have Uns	secured Claims		12/15
schedule G: Exec schedule D: Credi eft. Attach the Co ame and case nu	utory Contracts and Unexp itors Who Have Claims Sec intinuation Page to this pag imber (if known).	ired Leases (Official F ured by Property. If m le. If you have no infor	orm 106G). Do not include ore space is needed, copy t	contracts on Schedule A/B: Property any creditors with partially secured the Part you need, fill it out, number do not file that Part. On the top of ar	claims that are listed in the entries in the boxes on the
	All of Your PRIORITY Un				
_ `	tors have priority unsecure	d claims against you?			
No. Go to	Part 2.				
☐ Yes.					
	All of Your NONPRIORIT tors have nonpriority unsections.				
		• •		4.1	
□ No. You na	ave nothing to report in this p	art. Submit this form to	the court with your other sche	edules.	
Yes.					
unsecured cla	im, list the creditor separately	for each claim. For each	ch claim listed, identify what t	b holds each claim. If a creditor has m ype of claim it is. Do not list claims alre three nonpriority unsecured claims fill	eady included in Part 1. If more
					Total claim
4.1 Comm	onwealth Financial S	vstems Last 4	digits of account number	96N1	\$100.00
Nonpriori	ity Creditor's Name		-		
	Bankruptcy	When	was the debt incurred?	Opened 01/19	
	ain Street on City, PA 18519				
	Street City State Zip Code	As of t	the date you file, the claim i	s: Check all that apply	
Who inc	urred the debt? Check one.				
■ Debto	or 1 only	☐ Cor	ntingent		
☐ Debto	or 2 only	☐ Unl	liquidated		
☐ Debto	or 1 and Debtor 2 only	☐ Dis	puted		
☐ At lea	ast one of the debtors and and	other Type o	of NONPRIORITY unsecured	d claim:	
☐ Chec	k if this claim is for a comi	munity 🗖 Stu	ident loans		
debt		□ Ob		ration agreement or divorce that you d	id not
	aim subject to offset?		as priority claims	a along and albanit 9 111	
■ No			· · ·	g plans, and other similar debts	
☐ Yes		■ Oth	ner. Specify Emergency	Physicians Inc	

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 29 of 43 Case number (if known)

Debtor 1	Denessa	Denise Cartwright		Case no	imber (if knov	wn)	
	Family Hea	Ilth Services	Last 4 digits of account num	nber <u>2136</u>			\$120.36
;	3300 Wilco	x Blvd	When was the debt incurred	i?			
		ga, TN 37411 City State Zip Code	As of the date you file, the o	·laim is: Chack	all that annly	ı	
		the debt? Check one.	As of the date you me, the o	Jami 13. Offect	t all triat apply	1	
	■ Debtor 1 on	ıly	☐ Contingent				
	Debtor 2 on	ıly	☐ Unliquidated				
	Debtor 1 an	nd Debtor 2 only	☐ Disputed				
	At least one	e of the debtors and another	Type of NONPRIORITY unse	ecured claim:			
		is claim is for a community	Student loans				
	debt Is the claim su	ubject to offset?	☐ Obligations arising out of a report as priority claims	a separation ag	reement or di	ivorce that you did not	
	No		☐ Debts to pension or profit-	sharing plans,	and other sim	ilar debts	
	☐ Yes		■ Other. Specify Cartwr	ll Bill for M ight	inor Child	Nadia	
	PathGroup Nonpriority Cre		Last 4 digits of account num	nber <u>5114</u>			\$263.00
	P.O. Box 74 Cincinnati,	40858 OH 45274-0858	When was the debt incurred	i?			
		City State Zip Code the debt? Check one.	As of the date you file, the o	:laim is: Check	all that apply	1	
	Debtor 1 on	ıly	☐ Contingent				
	Debtor 2 on	ıly	☐ Unliquidated				
	Debtor 1 an	nd Debtor 2 only	☐ Disputed				
		e of the debtors and another	Type of NONPRIORITY unse	ecured claim:			
	☐ Check if th debt	is claim is for a community	☐ Student loans ☐ Obligations arising out of a			iverse that you did not	
		ıbject to offset?	report as priority claims	a separation ag	reement or a	ivorce that you did not	
	No		☐ Debts to pension or profit-	sharing plans,	and other sim	ilar debts	
	☐ Yes		Other. Specify Medica	ıl			
Part 3:	List Other	s to Be Notified About a Do	ebt That You Already Listed				
is tryin have m notified Name and Commo 245 Ma	g to collect fro ore than one of I for any debts d Address onwealth F	om you for a debt you owe to s creditor for any of the debts th s in Parts 1 or 2, do not fill out inancial Systems	about your bankruptcy, for a debt someone else, list the original crediat you listed in Parts 1 or 2, list the or submit this page. On which entry in Part 1 or Part 2 di Line 4.1 of (Check one): Last 4 digits of account number	itor in Parts 1 additional cr id you list the o	or 2, then list editors here. original creditor Creditors with	at the collection agency here. S If you do not have additional	Similarly, if you
Emerge	d Address ency Physic ox 13811	cians	On which entry in Part 1 or Part 2 di Line 4.1 of (<i>Check one</i>):	Part 1:	Creditors with	Priority Unsecured Claims	
	elphia, PA 1	19101		■ Part 2:	Creditors with	Nonpriority Unsecured Claims	
			Last 4 digits of account number				
Part 4:	Add the A	mounts for Each Type of U	Insecured Claim				
6. Total th		certain types of unsecured cl	aims. This information is for statist	tical reporting	purposes or	nly. 28 U.S.C. §159. Add the an	nounts for each
						Total Claim	
Total	6a.	Domestic support obligation	18	6a.	\$	0.00	
claims							
from Par	t 1 6b. 6c.	Taxes and certain other deb	its you owe the government Il injury while you were intoxicated	6b. 6c.	\$ \$	0.00	
	6d.	•	nsecured claims. Write that amount he		\$	0.00	

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Page 30 of 43 Case number (if known) Main Document

				,	·
				_	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	483.36
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	483.36

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Des

		IVITALLETATION		4.)
Fill in this infor	rmation to identify your	case:		
Debtor 1	Denessa Denise	Cartwright		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F TENNESSEE	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	=
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc

		Main Docu	ment Page 3	2 of 43	
Fill in thi	s information to identify you				
Debtor 1	Denessa Denise	Cartwright			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
		EASTERN DISTRICT C	E TENNESSEE		
Officed Sc	ates Bankruptcy Court for the:	LASTERN DISTRICT C	I I LININESSEE		
Case nun	nber				Charlettite in a
(II KIIOWII)					☐ Check if this is an amended filing
					umended ming
Officia	al Form 106H				
Sche	dule H: Your Cod	debtors			12/15
our name	e and case number (if knowr	n). Answer every question			o of any Additional Pages, write
_					
■ No					
☐ Ye	es .				
	thin the last 8 years, have yo na, California, Idaho, Louisiana				
■ No	o. Go to line 3.				
	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The cre	editor to whom you owe the debt
	Name, Number, Street, City, State and	ZIP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, line	e
	Name			□ Schedule E/F, I	ine
				☐ Schedule G, line	e
	Number Street			_	
	City	State	ZIP Code		
				Пол	
3.2	Name			□ Schedule D, line □ Schedule E/F, li	
				☐ Schedule E/F, I	
	Number Street				-
	City	State	ZIP Code		

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 33 of 43

Debtor 1 Denessa Denise Cartwright Debtor 2 Debtor 3 Denessa Denise Cartwright Debtor 4 Denessa Denise Cartwright Debtor 5 Dentes	Eill	in this information to identify your or	222							
United States Bankruptcy Court for the: _EASTERN DISTRICT OF TENNESSEE										
Case number (If known) Check if this is: An amended filing A supplement showing postpetition chapter 13 incomes of the following date: MM / DD/YYYY 12/15 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing plintly, and your spouse is living with you, include information about your spouse is living with you, on one include information about your spouse is not filing with you, do not include information about your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If we will not not not your spouse is living with you, include information about your spouse. If we will not not your spouse is living with you, include information about your spouse. If you have more than one job, attach a separate page with information about additional pages, write your name and case number (if known). Answer every question. If you have more than one job, attach a separate page with information about additional employers. Occupation Nurse The Health Center at Standifer Place Employer's name Employer's address How long employed there? 6 years Fart 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 5,313.49 \$ N/A						_				
Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Describe Employment 1. Fill in your employment information about your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate page with information about additional employers. Debtor 1 Debtor 2 or non-filing spouse Employer's name Employer's name Employer's name Employer's address How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. End 2: Give Details About Monthly Income Estimate monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Similar and list monthly overtime pay.	Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF TENNESSEE						
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1:				-			☐ An amende☐ A supplem	ed filing ent showing p		chapter
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 13	\bigcirc	fficial Form 106I							wing date:	
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing bintly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separated sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:			ome				MM / DD/`	/YYY		12/15
information. If you have more than one job, attach a separate page with information about additional employers. Occupation Nurse Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll 2. \$ 5,313.49 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	sup _i spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your sith you, do not include	spouse i de infori	s livir natio	ng with you, incl n about your sp	ude informat ouse. If more	ion about space is i	your needed,
attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Murse The Health Center at Standifer Place The Health Center at Standifer Place The Health Center at Standifer Place Employer's name For Debtor 1 For Debtor 1 For Debtor 2 or non-filling spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 5,313.49 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	1.			Debtor 1			Debtor	2 or non-filinç	g spouse	
Include part-time, seasonal, or self-employed work. Occupation Murse Imployer's name Cocupation may include student or homemaker, if it applies. How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 5,313.49 \$ N/A N/A			Employment status	■ Employed			☐ Empl	oyed		
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Employer's address How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 5,313.49 \$ N/A N/A		information about additional	_mployment oldide	☐ Not employed			☐ Not €	mployed		
Self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Employer's address How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 5,313.49 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Occupation	Nurse						
How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Employer's name		ter at S	andi	fer			
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Employer's address							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. +\$ 0.00 +\$ N/A	Par	t 2* Give Details About Mor	5 , ,	here? 6 years						
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 5,313.49 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	Esti spou	mate monthly income as of the dause unless you are separated. u or your non-filing spouse have mo	ate you file this form. If	,				·	•	J
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 5,313.49 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	more	e space, attach a separate sneet to	this form.				For Debtor 1			
	2.				2.	\$_	5,313.49	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$ 5,313.49 \$ N/A	3.	Estimate and list monthly overti	ime pay.		3.	+\$_	0.00	+\$	N/A	
	4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	5,313.49	\$	N/A_	

Official Form 106I Schedule I: Your Income page 1

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 34 of 43

Deb	tor 1	Denessa Denise Cartwright	-	C	ase number	(if known)				
					For Debto	r 1	F	or Debtor	2 or	
							n	on-filing s		
	Cop	y line 4 here	4.		\$5,	313.49	\$		N/A	<u>. </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	788.62	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c		\$	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.00	\$		N/A	_
	5e.	Insurance	5e			216.67	\$		N/A	
	5f. 5g.	Domestic support obligations Union dues	5f.		\$	0.00	\$ \$		N/A	_
	5g. 5h.	Other deductions. Specify: Benevolence FD	5g 5h		\$	0.00 5.42			N/A N/A	_
6.	bbΑ	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ <u> </u>	010.71	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		·	302.78	\$		N/A	_
		• • • • • • • • • • • • • • • • • • • •	7.	,	Φ <u>4,</u>	302.70	Φ		IN/A	<u>-</u>
8.	Eist 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$	0.00	\$		N/A	_
	8b.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b	٠.	\$	0.00	\$		N/A	<u>-</u>
	8c.	regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce	_		•					
	0.1	settlement, and property settlement.	8c			384.72	\$		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d		\$	0.00	\$ \$		N/A	_
	8f.	Other government assistance that you regularly receive	8e	•	Ψ	0.00	φ		N/A	_
	01.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	;							
		Specify:	8f.		\$	0.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g		\$	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	.+	\$	0.00	+ \$		N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		384.72	\$		N/	A
				_			_		1 [_	
10.		•	10.	\$_	4,687.	50 + \$		N/A	= \$_	4,687.50
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	. L						l L	
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not scify:	depe				•	n Schedul	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							\$	4,687.50
									Combi	ned
10	Dov	rou avaget an increase or decrease within the year often you file this form	2						month	ly income
ı ئ.	שם y	ou expect an increase or decrease within the year after you file this form No.	ſ							
	_	Ves Evolain:								

Official Form 106l Schedule I: Your Income page 2

FilLip.t	this information to ic	lentify your case			I		
Debtor					Chec	k if this is:	
Debioi	Denes	ssa Denise Ca	irtwright			An amended filing	
Debtor (Spous	e, if filing)						ving postpetition chapter the following date:
` '	· •,	f	FERNI DISTRICT OF TENNIF	0055	_	MM / DD / YYYY	
United	States Bankruptcy Col	int for the: EASI	TERN DISTRICT OF TENNE	35EE		WIWI / DD / YYYY	
Case no							
	cial Form 1						
	nedule J: Y						12/15
inform	complete and acc nation. If more spa er (if known). Ans	ce is needed, at	le. If two married people ar ttach another sheet to this ion.	e filing together, b form. On the top of	oth are equa f any additio	ally responsible fon nal pages, write y	or supplying correct your name and case
Part 1:							
	s this a joint case?						
	■ No. Go to line 2. ☐ Yes. Does Debto	r 2 live in a sep	arate household?				
	□No						
	☐ Yes. Debt	or 2 must file Off	icial Form 106J-2, Expenses	for Separate House	ehold of Debt	or 2.	
2. D	o you have depen	dents? 🛮 No					
	Do not list Debtor 1 a Debtor 2.	and ■ Yes	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	o not state the						□ No
d	lependents names.			Daughter		17	■ Yes □ No
							☐ Yes
							□ No
							☐ Yes
							□ No □ Yes
	o your expenses i		■ No				— 100
	expenses of people yourself and your d		☐ Yes				
Part 2:	Estimate You	· r Ongoing Mont	thly Fynansas				
Estima expen	ate your expenses	as of your bank	kruptcy filing date unless y tocy is filed. If this is a supp				
the va			h government assistance i ncluded it on Schedule I: \			Your exp	enses
(Onici	iai i 01111 1001.)				_		
	The rental or home eayments and any re		enses for your residence. I d or lot.	nclude first mortgag	e 4. \$		0.00
If	f not included in lir	ie 4:					
4	a. Real estate ta	ces			4a. \$		0.00
		eowner's, or rent			4b. \$		0.00
			d upkeep expenses ondominium dues		4c. \$ 4d. \$		0.00 0.00
			vour residence, such as ho	me equity loans	4u. ֆ 5. \$		0.00

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 36 of 43

Denessa Denise Cartwright	Case no	ımber (if known)
6. Utilities:			
6a. Electricity, heat, natural gas	6	a. \$	265.00
6b. Water, sewer, garbage collection		b. \$	70.00
6c. Telephone, cell phone, Internet, satellite.		c. \$	185.00
6d. Other. Specify: cell phone		d. \$	285.00
7. Food and housekeeping supplies		7. \$	685.00
8. Childcare and children's education costs		8. \$	150.00
9. Clothing, laundry, and dry cleaning		9. \$	100.00
10. Personal care products and services	1	0. \$	300.00
11. Medical and dental expenses	1	1. \$	100.00
12. Transportation. Include gas, maintenance, bu	s or train fare.		500.00
Do not include car payments.		2. \$	500.00
Entertainment, clubs, recreation, newspape	_	3. \$	100.00
4. Charitable contributions and religious dona	tions 1	4. \$	0.00
15. Insurance.			
Do not include insurance deducted from your p			
15a. Life insurance	15	a. \$	0.00
15b. Health insurance	15	b. \$	0.00
15c. Vehicle insurance	15	c. \$	100.00
15d. Other insurance. Specify:	15	d. \$	0.00
Taxes. Do not include taxes deducted from your		•	
Specify:		6. \$	0.00
7. Installment or lease payments:	_		
17a. Car payments for Vehicle 1	17	a. \$	0.00
17b. Car payments for Vehicle 2	17	b. \$	0.00
17c. Other. Specify: Loan From Family		c. \$	175.00
17d. Other. Specify:		d. \$	0.00
8. Your payments of alimony, maintenance, an		∽. Ψ	
deducted from your pay on line 5, Schedule		8. \$	0.00
9. Other payments you make to support others		\$	0.00
Specify:	1	9.	
0. Other real property expenses not included i			ncome.
20a. Mortgages on other property		a. \$	0.00
20b. Real estate taxes		b. \$	0.00
20c. Property, homeowner's, or renter's insur-		c. \$	0.00
20d. Maintenance, repair, and upkeep expens		d. \$	0.00
20e. Homeowner's association or condominiu		e. \$	0.00
1. Other: Specify:	2	1+\$	0.00
22. Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	3,015.00
22b. Copy line 22 (monthly expenses for Debto	or 2), if any, from Official Form 106.I-2	9	
			·
22c. Add line 22a and 22b. The result is your r	nonthly expenses.	\$	3,015.00
23. Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly inc	come) from Schedule I. 23.	a. \$	4,687.50
23b. Copy your monthly expenses from line 2		b\$	3,015.00
23c. Subtract your monthly expenses from yo			
The result is your <i>monthly net income</i> .	23	c. \$	1,672.50
24. Do you expect an increase or decrease in your system to your day on a start finish paying for your			
For example, do you expect to finish paying for your of modification to the terms of your mortgage?	ar loan within the year or do you expect your mortgag	e paym	nent to increase or decrease because of a
_			
■ No.			
☐ Yes. Explain here:			

Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 37 of 43

Fill in this infor	mation to identify your	case:			
Debtor 1	Denessa Denise	Cartwright			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	OF TENNESSEE		
Case number					
(if known)					Check if this is an amended filing
If two married p You must file th obtaining mone	eople are filing together	r, both are equally respo			
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				etition Preparer's Notice, nature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules file	ed with this declaration and	
X /s/ Dei	nessa Denise Cartwri	ight	x		
	ssa Denise Cartwrigh ure of Debtor 1	t	Signature of	Debtor 2	
Date	July 22, 2019		Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1:19-bk-12991-NWW Doc 1 Filed 07/22/19 Entered 07/22/19 13:37:00 Desc Main Document Page 42 of 43

United States Bankruptcy Court Eastern District of Tennessee

In re	Denessa Denise Cartwright		Case No.	
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Date:	July 22, 2019	/s/ Denessa Denise Cartwright	
	-	Denessa Denise Cartwright	
		Signature of Debtor	
Date:	July 22, 2019	/s/ W. Thomas Bible, Jr.	
		Signature of Attorney	
		W. Thomas Bible, Jr. 014754	
		Tom Bible Law	
		6918 Shallowford Road, Suite 100	
		Chattanooga, TN 37421	
		(423)424-3116 Fax: (423)499-6311	

Denessa Denise Cartwright 6719 Triple Crown Court Chattanooga, TN 37421

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Commonwealth Financial Systems Attn: Bankruptcy 245 Main Street Dickson City, PA 18519

Commonwealth Financial Systems 245 Main St Dickson City, PA 18519

Emergency Physicians P.O. Box 13811 Philadelphia, PA 19101

Family Health Services 3300 Wilcox Blvd Chattanooga, TN 37411

Home Point Financial Corporation Attn: Correspondence Dept 11511 Luna Road; Suite 200 Farmers Branch, TX 75234

Home Point Financial Corporation 11511 Luna Rd Ste 300 Farmers Branch, TX 75234

PathGroup P.O. Box 740858 Cincinnati, OH 45274-0858

Rubin, Lublin, PLLC 119 S. Main Street, Suite 500 Memphis, TN 38103